

Request for City Council Committee Action From the Department of Health & Family Support

Date: November 13, 2012

To: WAYS & MEANS/BUDGET COMMITTEE

Subject: AMEND REVENUE GRANT AGREEMENT FROM HENNEPIN

COUNTY FOR 2013 MINNESOTA FAMILY INVESTMENT PROGRAM

INNOVATION FUNDING

Recommendation:

Council authorization for the proper City officials to:

- 1. amend contract #35591 with Hennepin County to add up to \$250,000 in federal funding for the Minnesota Family Investment Program Innovation for a new contract total of \$500,000, extend the termination date to December 31, 2013, and
- 2. increase both the revenue estimate in fund/department 01300-8600122 by \$250,000 (revenue code 321007) and the 2012 appropriation in fund/department 01300-8600122 by \$250,000.

Previous Directives:	February 24, 2012 Council approval for 2012 funding.							
Prepared or Submitted by:	Becky McIntosh, Director of Planning & Administration Phone: x2884							
Approved by:	Gretchen Musicant, Commissioner of Health							
	e (PRC): Approval Not Applicable _X_ Approval Date of Approval Not Applicable _X_							
Presenters in Committee:	Gretchen Musicant, Commissioner of Health							

Financial Impact (Check those that apply)

<u>X</u>	Action	requires	an ap	propriation	increas	e to the	 Capital	Budget or	_X	Operating	Budget

X Action provides increased revenue for appropriation increase.

Background/Supporting Information Attached

The department is requesting to amend the contract with Hennepin County to receive an additional amount not to exceed \$250,000 in federal funding received through a grant from the state Department of Human Services to continue the Minnesota Family Investment Program (MFIP) Innovation project in 2013. This continues the pilot project to implement a single point of contact model to serve MFIP minor caregivers up to age 20 and their children, in partnership with the Minnesota Visiting Nurse Agency and Minneapolis Public Schools. This pilot is part of a long range plan for Hennepin County to restructure its services to implement the single point of contact model with its full MFIP teen parent population.